

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Fill in Reporting Period dates: Beginning Date: Aug	quet 17, 201	75 11 3			rk or Election Commission
Till ill reporting retrod dates.	gust 17, 201			ecember 31,	, 2018
Type of Report: (Check one)			¥	2	
8th day preceding preliminary 8th day preceding election	☐ 30 day	after election	year-e	end report	★ dissolution
	- A D				
Niels la Cour	Commi	ttee to Elect Nie	ls la Cour		
Candidate Full Name (if applicable)		2	Committee	Name	
Town Councilor, Amherst District 4	Liz Lars			m	÷ ,
Office Sought and District	2E Cum		me of Committee	5 = - 0.7 - 1.750	
124 North Whitney Street, Amherst, MA 01002 Residential Address	- 35 Suii	nmerfield Road, A	ommittee Maili		
E-mail: n placour a comeast, net	E-mail:	Tizinamy			0)~~
Phone # (optional):	Phone # (c		0		
SUMMARY BALAN	CE INFO	RMATION:			
Line 1: Ending Balance from previous report				22.4	17
Line 2: Total receipts this period (page 3, line 11	1)			\$66.8	30
The transfer of the transfer o	.)				_
Line 3: Subtotal (line 1 plus line 2)			-	89.2	.7
Line 4: Total expenditures this period (page 5, line	ne 14)			89.2	27
Line 5: Ending Balance (line 3 minus line 4)					0
Line 6: Total in-kind contributions this period (p	page 6)			64.5	5
Line 7: Total (all) outstanding liabilities (page 7))			Ø	6
Line 8: Name of bank(s) used: Florence Savings B	Bank				
Affidavit of Committee Treasurer:					
I certify that I have examined this report including attached schedules and it is, to the best					
activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind finance activity of all persons acting under the authority or on behalf of this committee in					nts the campaign
Signed under the penalties of perjury:	James De Carlos	(Treasurer's		Date:	1/14/19
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 b	oox only)				,
Candidate with Committee and no activity independent of the committee					W.
I certify that I have examined this report including attached schedules and it is, to the activity, of all persons acting under the authority or on behalf of this committee in an incurred any liabilities nor made any expenditures on my behalf during this reporting	accordance with	owledge and belief, the requirements of	a true and comp M.G.L. c. 55. 1	plete statement have not rece	t of all campaign finance ived any contributions,
Candidate without Committee OR Candidate with independent activity filing s					
I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, experiditures, disbussement	best of my kn	owledge and belief,	a true and comp	plete statement	of all campaign
campaign finance activity of all persons acting under the authority or or behalf of the	is committee in	accordance with the	requirements	of M.G.L. c. 55	5. / / / · · ·
Signed under the penalties of perjury:	3	(Candidate's	sionature)	Date:	1/1/19
			6		, ,

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

D . D	Name and Residential Address		Occupation & Employer		
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)		
	Committee to Elect Sarah LaCour	66.80			
	124 North Whitney Street				
	Amherst, MA 01002				
			**		
			 		
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ne 9: Total Recei	pts over \$50 (or listed above)	66.80			
ne 10: Total Recei	pts \$50 and under* (not listed above)	0			
ine 11: TOTAL RECEIPTS IN THE PERIOD					
	TO A SECOND RESEARCH TO A SECOND RESEARCH AND RESEARCH AN	66.80	← Enter on page 1, line 2		

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value	
				-	
		Line 15: In-Kind Contributions over \$50 (or listed above)			
	4	Line 16: In-Kind Contributions \$50 & under (not listed above)			
*	Enter on page 1, line $6 \rightarrow$	line $6 \rightarrow$ Line 17: TOTAL IN-KIND CONTRIBUTIONS 0			

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

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SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

eport an expen	To Whom Paid	mittee name and a page number o	m each page.)	
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
8/4/2018	Niels la Cour	124 North Whitney Street Amherst, MA 01002	GoDaddy website hosting reimbursement	64.55
,				
		Line 12: Total Expenditures ov	ver \$50 (or listed above)	
		Line 13: Total Expenditures \$5	0 and under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	TURES IN THE PERIOD	64.55

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
	9			
, , , , ,				
				o

Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)